| Effective October 1, 2003                                    |   |   |                 |                                   |              |                  |    |                     |                        |     |                     | एष्ठ                   |
|--|---|---|-----------------|-----------------------------------|--------------|------------------|----|---------------------|------------------------|-----|---------------------|------------------------|
|  |   | CLAIMS A                                  | (Column         |                                   | (Column 2)   |                  |    | SMALL ENTITY TYPE   |                        | OR  | OTHER               |                        |
| TOTAL CLAIMS   |   |   |                 |                                   |              |                  |    | RATE                | FEE                    |     | RATE                | FEE                    |
| FOR  |   |   | NUMBER FILED    |                                   | NUMBER EXTRA |                  |    | BASIC FE            | 385.00                 | OR  | BASIC FEE           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS                                      |   |   | 67 minus 20=    |                                   | · 47         |                  |    | XS 9=               | <i>:</i> : .           | OR  | XS18=               |                        |
| INDEPENDENT CLAIMS   |   |   | 7 minus 3 =     |                                   | 4            |                  |    | X43=                |                        | OR  | X86=                |                        |
| MULT   | IPLE DEPEN  | IDENT CLAIM PI                            | RESENT          |                                   |              |                  |    | +145=               |                        | OR  | +290=               |                        |
| JEE  | difference  | in column 1 is                            | less than ze    | zero, enter "0" in column 2       |              |                  |    | TOTAL               |                        | OR  | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |   |   |                 |                                   |              |                  |    | SMALL               | ENTITY                 | OR  | OTHER<br>SMALL      |                        |
| d '  | •   | CLAIMS REMAINING AFTER AMENDMENT          |                 | HIGH<br>NUM<br>PREVIO<br>PAID I   | BER          | PRESENT<br>EXTRA |    | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | otal  | .67                                       | Minus           | - (0                              | 7            | - 6              | N  | X\$ 9=              | ,                      | OR  | X\$18=              |                        |
| AME I  | dependent   | ·   | Minus           | ***                               | 7            |                  |    | X43=                |                        | OR  | X86=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |   |   |                 |                                   |              |                  | '  | +145=               |                        | OR  | +290°               |                        |
| ·  |   |   |                 |                                   |              |                  |    | TOTAL<br>ADDIT, FEE |                        | QF. | TOTAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)                             |   |   |                 |                                   |              |                  |    |                     |                        |     |                     |                        |
| ENT 8  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGH<br>NUME<br>PREVIO<br>PAID    | BER          | PRESENT<br>EXTRA |    | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | rtal  | •   | Minus           | - 6                               | 27           |                  |    | X\$ 9=              |                        | OR  | X\$18=              |                        |
| <b>2</b> L   | dependent   | •   | Minus           |                                   | 7            |                  |    | X43=                |                        | OR  | X86=                |                        |
| 15   | HST PHESE   | NTATION OF MU                             |                 |                                   | CLAIM        | حاطنت            | '  | +145=               |                        | OR  | +290=               |                        |
| •  |   | .01                                       | 05 ~0           |                                   |              |                  | ,  | TOTAL<br>DOIT, FEE  | •                      | OR  | TOTAL<br>ADDIT. FEE |                        |
|  |   | (Column 1)                                |                 | (Colun                            |              | (Column 3)       |    |                     | •                      |     |                     |                        |
| ENTC   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENOMENT |                 | HIGHI<br>NUME<br>PREVIO<br>PAID I | BER -        | PRESENT<br>EXTRA |    | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | rtel  | • 69                                      | Minus           | <b>-</b> 6                        | 7            | -2               | lſ | x\$75=              | 50.a                   | OR  | X\$16=              |                        |
| A ME   | dependent ·   | . 7                                       | Minus           | •••                               | 7            | •                | ŀ  | ×46=                |                        | OR  | X86=                |                        |
| F  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                 |                                   |              |                  |    |                     |                        | OR  | 360<br>+290=        |                        |
| - # #  | <ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 20, enter "20."</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."</li> </ul> |   |                 |                                   |              |                  |    |                     | 50. o                  | OB. | TOTAL<br>ADDIT. FEE |                        |
|  | "Highest Num  | ber Previously Pak                        | d For (Total or | Independe                         | nt) is the   | highest numbe    |    |                     | •                      | •   |                     | COMMERCE               |

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number